



Congratulations



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Peoples Hospital

Jasper, Alabama

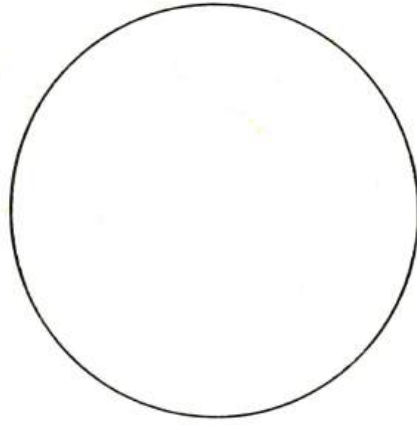
Hospital Birth Record

This Certifies that
was born to
in this Hospital at
the

In Witness Whereof the said Hospital has caused this Record of

Birth to be signed by its duly authorized officer and its

Official Seal to be hereunto affixed.





A Message From Your Hospital

In a very few days you will be going home with your precious new baby. We know you are looking forward to this wonderful period in your life—and we feel especially privileged to have had a part in its beginning. We want you to take away warm memories of your visit here; this copy of Congratulations is our farewell gesture to you. In it you will find a wealth of information to help you care for your baby during his important first year. It also provides a special section for the valuable records you will keep as your baby grows.

Baby's Own Story

Baby's Name

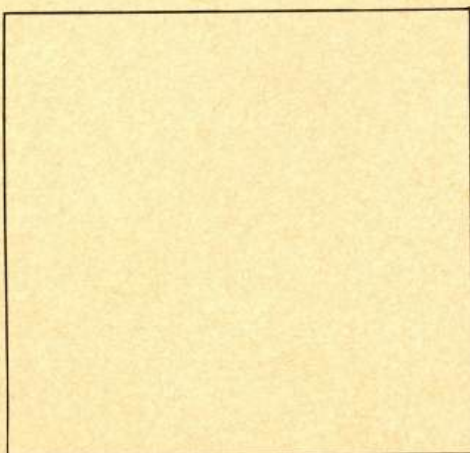
Father's Name

Mother's Maiden Name

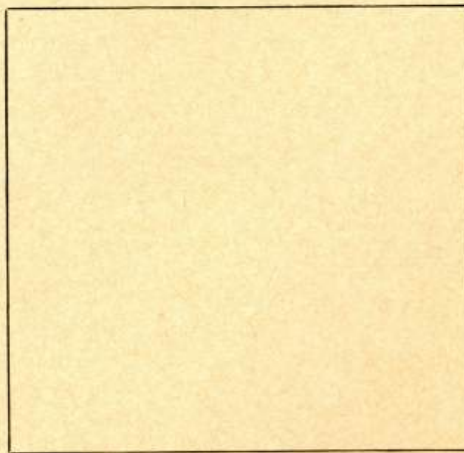
Hospital _____

Attending Physician _____ Nurse _____

Date of Birth _____ Hour _____ Weight _____ Height _____

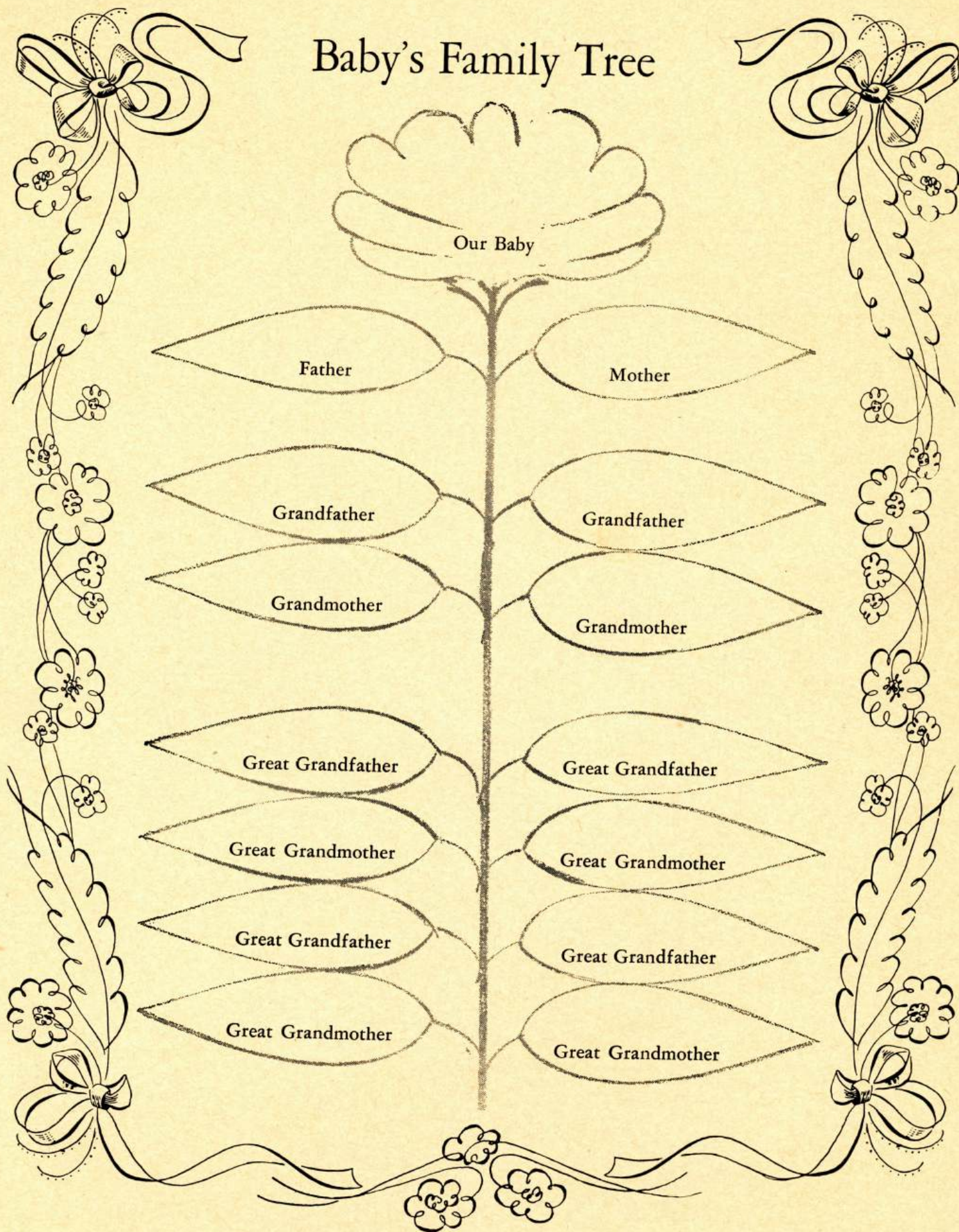


Baby's First Picture



Baby's Footprint

Baby's Family Tree



Congratulations

from Family
and Friends

Visitors

Letters

Calls

Telegrams

Flowers

Gifts

How Our Baby Grew

Weeks	Height	Weight	Weeks	Height	Weight	Weeks	Height	Weight
1			18			36		
2			19			37		
3			20			38		
4			21			39		
5			22			40		
6			23			41		
7			24			42		
8			25			43		
9			26			44		
10			27			45		
11			28			46		
12			29			47		
13			30			48		
14			31			49		
15			32			50		
16			33			51		
17			34			52		
			35					

Baby's First Smile _____ Baby First Crept _____

Baby's First Tooth _____ Baby's First Word _____

Baby First Sat Up _____ Baby's First Step _____

NOTES _____

Health Record

	<i>Doctor</i>	<i>Dates</i>
Chicken Pox	•	
Measles	•	
Mumps	•	
Whooping Cough	•	
Tonsillitis	•	
Tonsillectomy	•	
Bronchitis	•	
Pneumonia	•	
Poliomyelitis	•	
Influenza	•	
Allergy	•	
Appendicitis	•	
Rheumatism	•	
Convulsions	•	
Ear Disturbances	•	
Fractures	•	

IMMUNIZATIONS

	<i>Date Completed</i>	<i>Booster</i>	<i>Booster</i>
Small Pox			
Diphtheria — Tetanus — Whooping Cough (course consists of 3 injections)	•	•	•
Poliomyelitis Vaccine (course consists of 4 injections)	•	•	•
Tuberculin Test	•	•	•
Other Immunizations	•	•	•
	•	•	•
	•	•	•

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There, now—you're on your own.



Wonder where you got all that practice!



Works fine—we're both experts!

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"from Contented Cows"

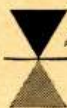
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for a very
special tot



from **ALCOA**

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So when you shop for that very special tot, look for Alcoa's new custom-threaded aluminum baby food cap. Look for Alcoa's name on the skirt of the cap. It's the mark of friendly-to-food aluminum.



ALCOA ALUMINUM

CLOSURES

Congratulations

YOUR FIRST YEAR WITH BABY

Volume Twenty-Five

THIRD ISSUE OF 1961

Number Three

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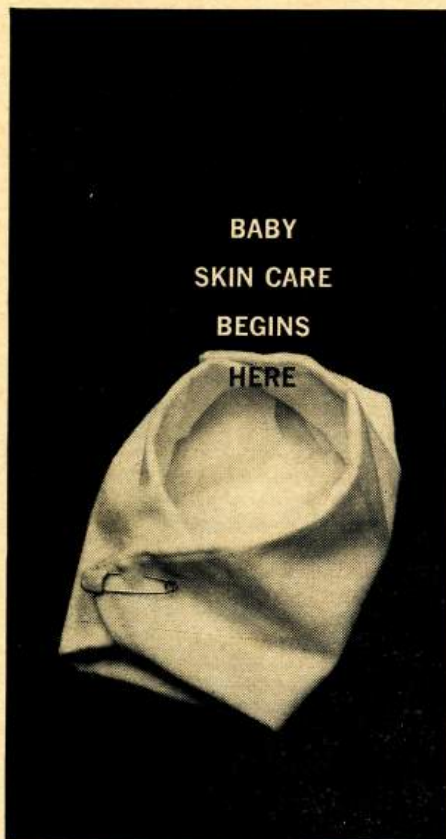
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By Peg Rivers, Editor

If Time Could Stand Still

Having your baby in your arms is even more wonderful than you dreamed it would be. He is so small; so helpless; so different from every other baby in the world. But your joy now—at this moment—is nothing to the unique companionship you and he are going to share during the first year of his life. As you bathe him, dress him, feed him, cuddle him when he cries—you will enjoy a relationship that no two people other than a mother-and-baby can possibly know. His dependence will touch you while you unconsciously realize that his independence will some day make you very happy. His care, while it may seem irksome at times, will never become a burden because you will always have at the back of your mind the thought that someday he will grow up and need your loving ministrations no longer. It is a mother's special insight that she is able to enjoy the wonderful present while she anticipates the promise of the future. But if every mother in the world were permitted a wish as she lives through the radiant days of that first year with her baby, it would probably be, "If time could only stand still here and now!"





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Even the cleanest-looking, whitest diaper can be laden with bacteria that act on urine to cause diaper rash and odors. You can't get rid of these troublesome organisms just by ordinary washing, but you can kill them with Diaparene Rinse.

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Recommended
by
Doctors



Congratulations

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When Company Comes

"If I didn't spend so much time seeing visitors and unwrapping their lovely gifts, I might be able to take care of my baby!" a new mother said despairingly.

Although she was exaggerating, every mother will sympathize with her. New mothers just have to make a few rules. There are not enough hours in the day to get the proper amount of rest, to give round-the-clock care to baby and to entertain company—and do them all well.

Try, first of all, to be selective about visitors. Postpone those visits you don't thoroughly enjoy. Tell your friends the doctor won't allow more than one or two visitors a day for the first month. If you like, confess that you're just too tired.

You might consider eliminating all burdensome guests by getting an unlisted telephone number. You can gradually give out the number to more and more friends. If you do not care to go to such extremes, you should at least explain to your friends that you can't accept telephone calls or visitors after nine.

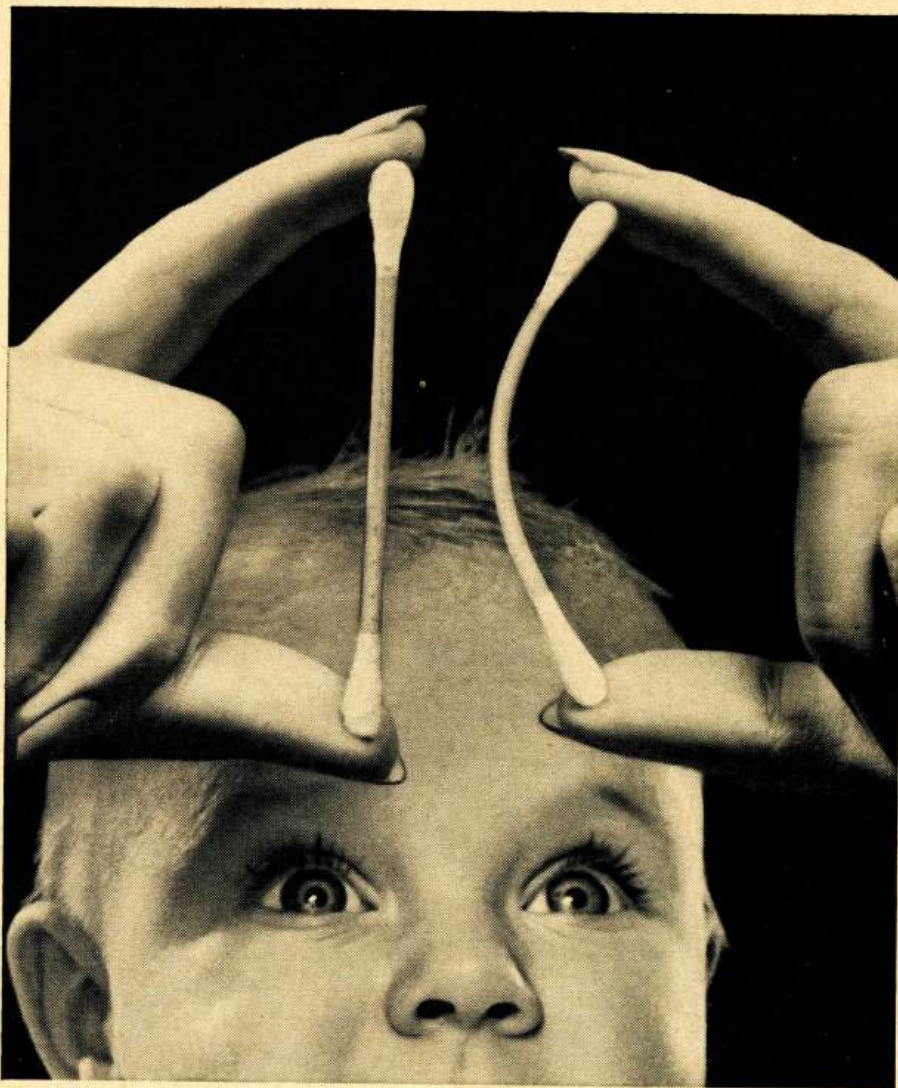
Above all, don't plan any elaborate entertaining. If you must serve food, buy ready-cooked, packaged items.

If your friends stay longer than an hour, don't feel guilty about excusing yourself to make formula or fold diapers. Perhaps you can accomplish such jobs as ironing baby clothes or walking or bathing Baby while your guests chat. Some visitors might even enjoy doing one or two jobs for you.

Never let anyone near your baby with a cold. Even your very dearest relatives should be barred when they are coughing or sneezing. Your doctor will back you up in this.

Noisy visitors can't wake up your newborn but you don't want him to be picked up, kissed, or played with roughly. Let your friends get a good look at baby, but mention to them that both you and the little one will be more receptive to company in two or three months.

For baby's safety...compare



OLD-TYPE WOODEN SWABS have sticks that may jab and hurt. They can't "give." Not safe enough for cleansing a wiggly baby.

NEW BUDS WITH 'SAFE-STEMS'* bend...gently. They "give" under pressure instead of jabbing, poking. Guard your baby from hurts.



the only swabs with **'SAFE-STEMS'**

Johnson & Johnson



The New Baby is a Family Affair

By Alfred J. Vignec, M.D.
*Consultant Pediatrician
and Contributing Editor*

When the new baby arrives from the hospital the character of the home must gradually change to meet the needs of the little newcomer. The many odds and ends concerned with the care of an infant must be kept in appropriate places. Dangerous and precious objects must be stored or moved out of reach. At times it is the mother who is somewhat upset by these changes; in other families the father feels them most keenly.

While the new mother is making her various adjustments, the father often feels somewhat left out of her world. Although he is devoted to his baby, at this stage of its life his tie to it is somewhat less intimate and strong than the tie between infant and mother. When he is tired, hurt, uncomfortable, or in difficulty a baby instinctively turns to Mommy.

Many fathers, even understanding ones, are deeply hurt by this. Actually, it is perfectly natural. The father, if he is so inclined, may occasionally feed or change, or even bathe the infant (which is an excellent practice, incidentally), but the consistent care must of necessity come from the mother. Once the child is a runabout and has a relative degree of self-dependence, the father grows in importance to a point where at times the mother feels a twinge at being "left out of things" herself. Mutual understanding is necessary, always.

The father may also miss his wife's small attentions to his own

needs, because of her preoccupation with the new baby. But the joys of fatherhood eventually outweigh these discomforts if they are understood and not resented and brooded over until they become magnified.

Some grandparents, especially grandmothers, cause minor upheavals. They know "All About Babies," and make their knowledge felt. Unfortunately, they raised their children in another era, and ideas have changed. The young mother must often be a bit of a diplomat with Grandma. It does no harm to rock the baby (within reasonable limits) although Grandma may think it does. Toilet training methods have also changed considerably. The young mother must establish her methods and pursue them—and try to avoid argument. She must use her own judgment about the amount of active participation she can accept from the grandmother, and this will depend to a large extent on Grandma herself.



That Important First Year in Your Baby's Life

By Benjamin C. Berliner, M.D.
*Attending Pediatrician,
Long Island Jewish Hospital,
New York City*

What to Look for during the 1st Three Months

Getting to know your new baby is an exciting experience. During those vital first three months, you will get your bearings as a mother—you will learn how to care for your baby without doubt or uncertainty, the best way to feed him, what to do when he cries and how much sleep he will require. Best of all, you can enjoy him as he begins the wonderful process of growing up.

Much has been said about "demand feeding" versus "rigid schedules." It seems unnatural to us to delay an infant's feeding to meet an arbitrary pre-determined schedule. Infants should be fed when they are hungry. They may be awakened after a suitable period for the convenience of the mother. The biggest problem that we have encountered with "demand feeding" lies in the interpretation of the "demand." As we discuss in the following paragraph, babies cry for other reasons than hunger, and need not be fed each time they cry.

Schedules

Some babies sleep quietly for eighteen or twenty hours a day. Often they sleep much less than this. But, even if they do sleep for a maximum number of hours each day, what about the other four to six hours? Too often unsuspecting parents have been led to believe that babies cry only from hunger or pain. Nothing could be further from the truth! Almost all infants have what may be called normal

fussy periods—we call them social hours. By this we mean regular intermittent crying, occurring daily and lasting from ten minutes to as long as three hours. Dreadfully enough, it starts most frequently around 5:00 P.M., and sometimes lasts through dinner and the early evening hours.

Crying

There are, of course, personality differences among infants which account in part for the variation in length and intensity of these crying periods. This inherent difference in individuals, it seems to us, emphasizes the fallacy in stereotyped advice to young parents. Some infants (and it is often apparent in the new-born nursery) are very intense about their wants, while others tend to be quiet and passive. It is unreasonable to assume that they must or should be handled identically.

Babies do cry, of course, because of hunger. To meet this particular exigency, there are approximately 65 proprietary milk or milk substitute formulas on the market. With few exceptions, they are advertised as being similar to or "nearly as good as" maternal milk. From this it would be fair to assume that the



Feeding

latter is still considered the ideal.

There are, in all fairness, no statistics to prove that nursed babies grow and develop better or faster, or that they have fewer emotional problems in later life. There is abundant evidence that suckling at the breast is the normal relationship of the human mother and her infant. There seems little cause to alter this relationship unless physical or strong personal reasons are involved which make it advisable.

If you cannot breast feed your baby, don't let yourself develop guilt feelings about it. As stated above, there are many products on the market which very closely approximate mother's milk, and there is every indication that bottle fed babies thrive as well as breast fed infants do.

Your doctor will tell you which formula he feels will be best for your baby, and he will see to it that you get the proper instructions for preparing it.

It's important for you to hold the baby for his feedings. The

bottle-fed baby needs the reassurance of his mother's arms around him, the warmth and security of her closeness. So, don't let your baby's bottles be propped. If you firmly set aside the time for feedings, you will both enjoy the closeness of this shared experience.

If your baby does not seem to be happy with his formula, by all means tell his doctor; he will certainly want to adjust or change it. The age at which doctors stop formula feeding varies, but is rarely during this first three month period.

Your baby's first bath will be a memorable occasion for him, and for you. Pick a time when you feel unhurried and relaxed. Your baby will sense any tension, so wait until you feel confident enough in your handling of him to carry the bath off with aplomb.

Certain safety rules should be followed. Always bathe baby before a feeding. Never leave safety pins where baby can get at them. Never, never leave baby alone, in the bath or on his dressing table.

Bathing

That Important First Year

By
Frank Howard Richardson, M.D.
*Fellow of the American Academy
of Pediatrics*

What to Look for during the **2nd** Three Months

Mothers of babies entering the third-to-sixth month period are surprised at a new attitude in their tiny charges. Suddenly, they may want to be with the family and will seem to dislike being left alone. They may begin to develop an interest in things other than merely eating and sleeping. And although they are still passive in their acceptance of mother's care and attention, it should be obvious to her that a new independence is entering into her baby's attitude; he seems to be trying to find gratification in things of his own discovering. This is actually the first phase of a developing personality and it is fascinating to be around a baby during this period.

Responsiveness

You will be happy now because your baby is suddenly an outgoing individual—laughing out loud, noticing new people, responding more and more to the family and sometimes even to visitors. He now reaches for objects you dangle before him like a toy or rattle, and will hold on to something placed in his hand, if only just for a moment. Even before his fourth month, he enjoyed playing with his hands—now by taking hold of a toy he has found a use for his hands.

When you take him into a strange room with strange people, he will really begin to notice them. He is getting gregarious and will cry for company more than he did before this time. He is also beginning to recognize sounds and associate them with some familiar routine even when he cannot see what you are doing. He knows the sound of his bottle when you are preparing it in

the kitchen—or your step when you come into his room in the dark. Often, in this fourth month, babies show an interest in moving objects and turn toward them as far as they can. They also indicate that their eyes are attracted by bright things—many babies, in fact, show a definite preference for reds and yellows.

Your baby's doctor will decide when your baby needs solid foods in his diet. Some doctors start babies on solids before the first month; others prefer to wait until the baby is three or four months old, or even later. By this time, a baby can take more than milk. His digestive system is now able to take care of a greater variety of foods. And he is using up energy in growing too.

The doctor may recommend starting baby on strained cereal or fruit, but whichever he advises, start him slowly with small amounts at a time. The experience of eating from a spoon plus the new and unexpected taste of a solid food may be repugnant to him at first; he will probably spit the food out. It may take days or even weeks before he accepts it but don't worry as long as he is still taking his daily quota of milk. Eventually he will learn the totally new (to him) technique of swallowing solids and then your job will be easier. When baby is four-to-six-months old, your doctor may start him on strained vegetables and meats. Just as you did with cereals and fruits, it is wise to start

Adding Solids



him slowly, avoiding any semblance of a struggle to get him to take them. Again, he will become accustomed to the new taste and will eat two or three tablespoonfuls at a time. Mothers used to spend many hours pureeing and straining all of their baby's food but this has become unnecessary with the excellent and healthful products already prepared for babies today.

Starting the Cup

Some babies are interested in drinking from a cup much earlier than others. Many babies of four or five months willingly drink a few sips of water or orange juice from a cup held by mother. It is a good idea to try to accustom your baby to a cup at this age even if he is not much interested. If he takes just a sip at a time, consider it a good beginning and offer it to him again and again.

As he becomes used to the feel of the cup against his lips, instead of the breast or the nipple of his bottle, you might try giving him a little of his milk in a cup. Warm it first—most babies prefer it that way. He will not be willing to take all of his milk from a cup for some time

as he still has a strong need for sucking. But you will find that the earlier you get your baby used to the cup, the easier it will be to wean him when the time comes.

Thumb-sucking may start at a very early age—or it may be a late manifestation in your baby's development. Usually, however, babies find their thumbs or fingers with their mouths in the first three months of infancy. It seems obvious that the reason for a baby's thumb-sucking is to comfort and quiet him. Many doctors feel that the habit is started in the early months of infancy because the baby is not getting enough sucking time at the breast or bottle. Later on in babyhood, they feel that thumb-sucking stems from a basic need for security.

Thumb-sucking

The most important thing that every mother must learn about thumb-sucking is that it is not a harmful habit unless it is excessive. Mechanical restraints should never be used; better to try to give the baby more sucking time at his feedings. Keep your baby happy, well-fed and well-loved and he will soon forget the need for his thumb.

What
to Look for
during the
3rd Three
Months

By H. Laurence Dowd, M.D.
Roosevelt and Doctor's Hospitals
Fellow of the American
Medical Association

By the time a baby reaches his sixth month, there are many visible changes in his approach to life around him—and his own participation in it. He is developing as a person as well as physically; from his sixth to his ninth month many significant advances are observed by his parents.

One thing must always be kept in mind by the mother watching her child's growth with proud and affectionate eyes. No two babies are alike; no two babies develop at the same rate. It is impossible to create a timetable that can be consulted rigidly as to when baby will do this or do that. Instead of trying to pin down an exact time when certain things will take place, mother should be observant as to *what* the baby is doing rather than *when*. This will act as a guidepost to her; she will know how to help him along in the proper development pattern.

Sitting Up

Between six and eight months, the baby will learn to sit up. Before this, he enjoyed sitting propped with pillows—but sometime during this period, his back will have developed enough to permit him to sit up alone. During this important six months, he will also roll over from back to stomach and vice versa. You will find him using his hands more and more to reach for things, even to try to grasp them. He will

That Important First Year

splash in his tub, crumple paper to hear the sound it makes, bang with a spoon or block. This is the period, too, when he likes to imitate—he puts his hands over his eyes to play “peek” with his mother—waves “goodbye” when you wave at him. He may now begin to coo to music, and is apt to move his body in rhythm to it by the time he is nine months old. He may begin around this time to articulate a few syllables and will respond to animated facial expressions by those around him. During this period most babies play actively with rattles, begin to recognize people other than mother and show an active interest in other children. But there may be a slight tendency to shyness when strangers appear—this will be over before the end of the first year.

Creeping and crawling usually begin after a baby can sit alone. Many babies start to get around by hunching themselves along in a sidewise manner—or by rolling or jerking themselves along in a prone position. Most babies find some means of locomotion that is peculiarly their own; some babies actually never creep at all but find another way of getting about that is easier for them.

Creeping



Pulling themselves to a standing position is the step that comes between creeping and actually trying to walk—with many babies, this happens about nine months although mothers should not worry if attempts to stand alone are delayed beyond this time since body control varies greatly in individual babies. The important thing is not to try to hurry your baby—but when he starts his adventurous career of moving about, help him all you can.

Teeth

The first teeth to come in are the "milk teeth." They may appear anywhere from the fifth to the ninth month but the ages at which baby teeth come in differs greatly. However, the order in which practically every baby's teeth come in is as follows: the two lower front teeth first; next the four upper front teeth. After a lapse of several months, other teeth appear—two more in the lower jaw near the back—then two in the upper jaw. Later two upper and two lower eye-teeth come through—and then your baby's temporary set of teeth is com-

plete. The permanent teeth, of course, do not come through the gums until much later.

Sleep

It is usually between the ages of six to nine months that many babies seem to go through sleeping difficulties. Often there is no apparent cause for this wakefulness. Usually these sleep problems do not last long; they are characterized by a wakefulness and restlessness at night. This tendency to sleeplessness should disappear toward the end of the first year. One way to help babies through this difficult time is to make their sleeping routine as regular as possible, and to keep their daily lives free of upsets and new experiences. Of course, when a baby has a cold or respiratory infection his sleep may be disturbed, but the doctor should be consulted about this.

What
to Look for
during the
4th Three
Months



That Important First Year

Walking

By Walter J. Coville, Ph.D.
*Chief, Clinical Psychology Services,
Saint Vincent's Hospital,
New York City*

Nine months have passed since you first held your baby. You know by now that he sets his own pace in growing and that he must go through various stages of development. Each stage successfully passed becomes the foundation for the next; your baby cannot skip or be pushed through a stage until he is ready for it, no matter how anxious you may be.

In fact, if you attempt to speed up the process of growth beyond your baby's readiness, you may be creating stresses and frustrations that actually retard his development. Now that he is about to accept the challenges of walking, talking, eating and behaving as others do, you must be more careful than ever to let him set his own pace.

At about nine months, your baby can pull himself up to a standing position although he cannot let himself down without a thump. You may help him at this stage by flexing his knees and showing him how to sit down. He will repeat this exercise over and over again until he masters it; then he is ready for the next important milestone in his first year, walking. This may begin as early as the tenth month and at times as late as the fifteenth month. This also may be a worrying time for you but you must have confidence in your baby's readiness and ability to walk. Don't frustrate him and his initial awkwardness will disappear. Let him roam from one end of the room to the other, and even let him accept the challenge of climbing a stair. The fact that you are there to help him and understand him constitutes one of the principal sources of security for him now and later. Once he is walking, your pediatrician will advise you about shoes.

continued on page 29



HOW DOES IT FEEL TO BE A BABY?

It feels hungry... or full. Chilled... or warm. Wet... or dry. Rough... or smooth. Frightened... or loved.

And almost always it feels a little more comfortable when Johnson's time comes.

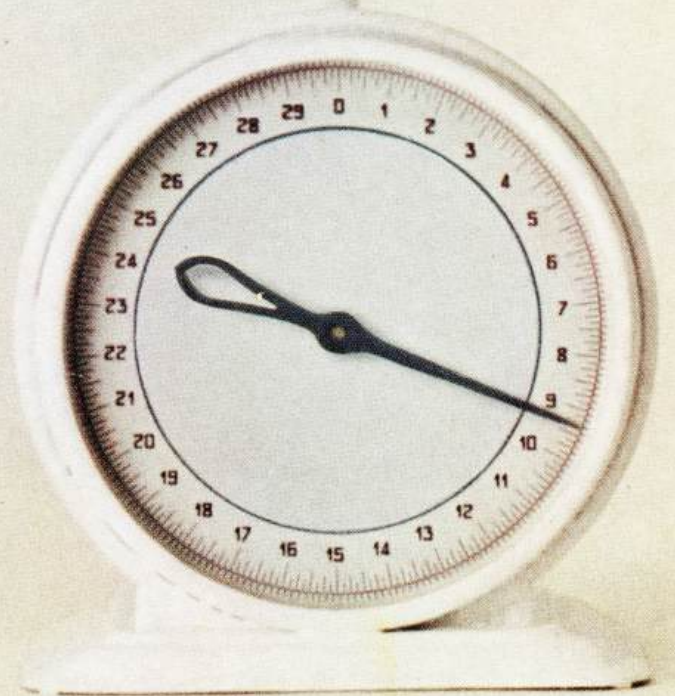
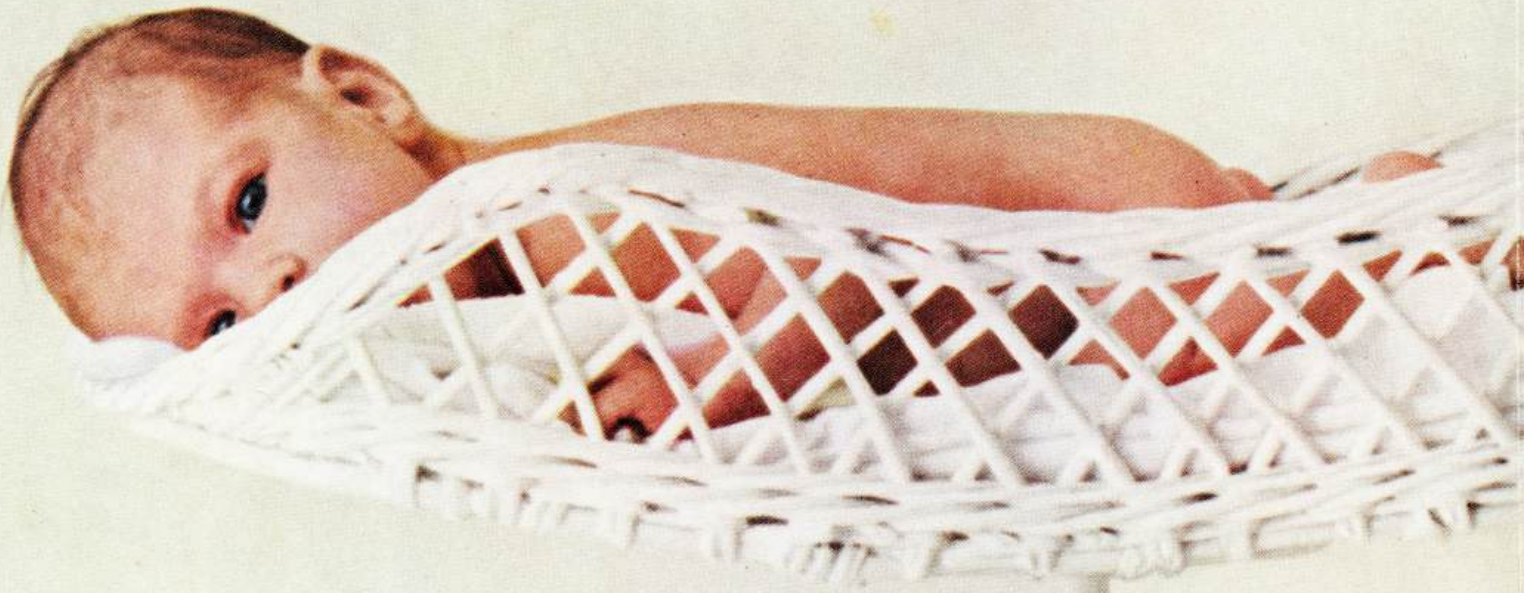
For Johnson's Baby Products are a softness to touch... a soothing protection... an expression of

loving care that even a tiny baby can feel and know. The purest, silkiest of powders... the smoothest, gentlest of oils.

FRAGILE...
handle with Johnson's



worth his ^{her} weight
in love





BRINGING UP BABY® HINTS, COLLECTED BY MRS. DAN GERBER, MOTHER OF 5

Homeward bound—a bundle of love in your arms. Such a happy event! And if you feel somewhat awed by the enormity of your new responsibility, you may well take courage from these warm words of a second-time mother: "I've found that a baby is ever so reasonable. If you keep him cozy enough, his tummy full enough and help him keep his dates with the sandman, he'll show his approval in inches and ounces. Then, if you make him feel wanted enough, he'll reward you with a happy heart and a kind of love you've never known."

Facts on first feedings. If your doctor and you have decided to bottle-feed your bundle of joy, it should be reassuring to know that you will not be depriving your little one of adequate nutrition. These are the facts:

- ♥ *Modern baby formulas today provide nutrition comparable to mother's milk.*
- ♥ *There is little or no evidence that bottle-fed babies do not thrive and gain weight as well as breast-fed babies. You can put just as much love into bottle-feeding.*
- ♥ *The important thing to remember is that it's essential to let your doctor specify the type of formula your baby needs.*

Worth its weight in nourishment. Before you know it your doctor will order cereal to supplement baby's formula to give him iron and other nutrients. Gerber Cereals contain a selected form of iron that can be easily absorbed by your baby. (6 tablespoons provide more than 100% of the Recommended Daily Dietary Allowance for iron.) In addition, they're also enriched with bone-building calcium and B-vitamins. Ready-to-serve with formula or milk, they stir to creamy perfection in seconds.



Feeding footnote. Make the cereal mixture quite soup-y at first, till baby learns the knack of swallowing. Rotate Rice Cereal, Barley, Oatmeal, Mixed Cereal and High Protein Cereal for appetite interest.

Weigh this one carefully. Most mothers are tempted to weigh baby much too often in the early months. As a consequence, every

little lost ounce becomes a cause for anxiety. All babies have their ups and downs in weight, but most babies double their weight at 6 months, triple it in a year. Your best bet is to weigh baby once a week; consider the gain picture by the month.

Vitamin viewpoint One of the early nutrients specified by doctors is vitamin C... the vitamin needed for the development of strong bones and teeth, sound gums and body tissues. Gerber Strained Orange Juice is the ideal way to provide this important vitamin. Mild and most palatable, it's brimming with vitamin C. Of course, it's pasteurized for baby's protection and finely strained for easy sipping from spoon, bottle or cup. Other starting juices: Gerber Apple Juice and Orange-Apple—both enriched with vitamin C.



String-around-the-finger dept. Remember, body stores of vitamin C are limited so daily food sources, such as Gerber Juices, are recommended.

"Building blocks" for baby's body. Babies develop so rapidly during the first year, they need more protein* per pound of body weight than adults. Daily servings of any one of Gerber Strained Meats provide protein to spare. Made from selected Armour cuts, these quality meats are specially processed to protect nutritional goodness and natural meat flavors. And most of the fat and coarse tissue is removed for digestibility.



* **Armour Meat Protein** is complete protein, supplying all the essential amino acids that build and re-build vital body tissues.

Here at Gerber we prepare over 100 cereals, strained and junior foods, to meet your baby's nutritional needs. We're proud to say:

"Babies are our business...our only business!"



Breast or Bottle for Your Baby?

By Jane Harper

Whether you feed your baby by breast or by bottle, it is important to keep in mind his deep need for comfort and security. The breast-fed baby acquires this from the start because of the warmth of your arms; the bottle-fed baby should be held just as closely and warmly when he takes his feedings.

An important part of your feeding ritual is proper equipment. Many mothers who breast-feed their babies neglect to supply themselves with bottles and nipples for supplementary feedings, and for water and juice. They will also need a sterilizer because anything given a young baby should be in sterile bottles.

As a rule, the mother who breast-feeds her baby substitutes what is known as a "freedom" bottle for one breast feeding every once in a while. She usually starts this when the baby is about six weeks or two months old, and is on a fairly regular feeding schedule. This supplementary bottle makes it possible for her to be away from home occasionally for longer periods than between nursings. It is best not to give baby more than one bottle a day or the supply of breast milk



might be affected. But if you give one such bottle each day, or every few days, the supply of breast milk will adjust to the minor change. Not all babies will take a bottle in place of the breast; the best plan is to start before the end of the second month so that your baby will become accustomed to the idea early.

There is a proper technique to bottle feeding too. Naturally, for a complete program of bottle feeding, you need a full supply of necessary equipment—eight-ounce and four-ounce nursers, plenty of nipples, a sterilizer, formula pitcher, funnel strainer, bottle and nipple brush, and if you like, an electric bottle warmer.

When giving baby his bottle, always cradle him in your arms and try not to let his feedings be interrupted. Be sure to tilt the bottle up so that the nipple is always full of milk, otherwise baby is apt to swallow air and will require needless burping. Some babies suck steadily until they have taken all they want. Others need to be burped in the middle as well as after the feeding. Still others need burping as much as two or three times during the feeding. To burp the baby, hold him against your shoulder (or sit him upright on your lap) and pat him gently on the back.

Some babies—particularly newborns—fall asleep on half a bottle and it's almost impossible to rouse them to finish the feeding. If your baby behaves this way, it's best to let him sleep and feed him again when he wakes up. Be sure, when this happens, to put baby's bottle back in the refrigerator at once. Every moment that it's exposed to room temperature permits bacteria to form.

during the 4th Three Months

continued from page 24

Talking

The age at which a baby talks is a matter of individual temperament. Most children begin to talk at about a year; other perfectly normal babies may wait months longer.

Ever since you've had your baby, he's been expressing himself in various ways. Recently, you may have noted that your baby was beginning to experiment with speech—that he was aware of and was enjoying the sound of his own voice. At about nine or ten months, he is producing many sounds and is reacting to demonstration; he is now anxious to imitate repeatedly the sounds that others make. It is important at this time that he has good models to imitate because he will imitate incorrect speech just as enthusiastically as correct speech. Baby talk, therefore, should be avoided since it does not facilitate understanding but rather, tends to cause a fixation on baby vocabulary and to delay the acquisition of speech.

Perhaps the most significant factor in your baby's speech development is the emotional relationship he has with you since a rich, close maternal relationship helps a child to acquire speech easily and naturally. Your baby develops his ability to speak in his own way and at his own rate of speed. He enjoys your reaction to his first words, and this bit of pleasure motivates him to conquer the world of vocabulary. Each new word mastered makes him feel more adequate, independent and more capable of meeting his own needs.

One of the most important guides in weaning your baby is his ability

to tolerate frustration. Thus, he is ready for weaning when you observe that he can be without his bottle for an hour or two and enjoys drinking from a cup. Some babies, however, need the comfort of their bottle at night, but substitution of special attentions at this time often helps them make the transition.

Abrupt weaning should be avoided since it tends to develop feelings of loss of love. Essential to all aspects of feeding is a genuine love and acceptance of your baby.

Although habits of control are usually established between the ages of three and four, experts disagree on just when this training should begin. You know, however, that physiological and psychological readiness is the real cue, and that premature and especially vigorous toilet training can severely disturb your child's personality development. Usually, toilet training may begin sometime between six and twelve months. Mastery of bowel control may begin when your baby stands and walks; readiness of bladder control, however, develops later. If training for bowel control is easy for your baby, then training of the bladder is much easier. Coercion in achieving early bowel or bladder control is a common source of confusion, frustration and anxiety which stem from a disapproving mother, and which baby may express through various fears.

Weaning

Toilet Training

Nutrition— The Start of a Strong Body

By Elizabeth D. Munves, Ph.D.
Curriculum Director of Nutrition
New York University, New York City

Our ideas about infant feeding are constantly changing. Because of research we understand more about the nutritive needs of the infant. Improved methods of food processing have allowed us to introduce many and varied foods into a baby's diet.

What do all these advances mean to you—the mother of a new baby? It means that you may feed your baby a little differently than you might have a few years ago. But it also means that meeting the nutritional needs of the infant is easily done with readily available baby foods.

You may ask yourself, what does your baby need to eat? How many of the vitamins and minerals that were stressed in your prenatal lectures should he have after he is born? Even though your baby is doing nicely, you may occasionally wonder if his foods do satisfy his nutritional needs.

Few mothers realize that the amount of each nutrient suggested for her baby is determined, in general, by the recommendations of the Food and Nutrition Board of the National Research Council. These recommendations represent the opinions of leading authorities in the field. Each baby is an individual, and these recommendations are high enough to allow for variation in need. They also include a consideration of the infant's ability to digest foods.

One of your baby's first needs is that for calories. His energy (caloric) requirements are from 2 to 3 times that of the adult in terms of body weight. He needs calories for growth and for his physical activity. "What

activity?" you might ask as you look at a tiny infant. Crying itself uses energy, and then, later, kicking and moving around the crib will call for additional calories. The extent of activity will vary with babies.

Calories in sufficient quantity are supplied by breast milk. Carbohydrates, such as cane sugar, dextrimaltose, etc., are added to the formula to bring the amount up to that found in human milk. Cereals and fruits, usually the first "solid" foods added to the diet, are good sources of calories. The butterfat found in milk also supplies calories.

Protein is another important nutrient. At one time it was accepted that the protein in breast milk was superior to that in the cow's milk formula. However, milk used in formulas today is usually subjected to additional processing, such as evaporating, boiling, diluting, drying, or acidifying. This reduces the curd to a size similar to that found in breast milk, making it easily available for digestion. Thus, utilization of protein from cow's milk may be as efficient as that from human milk.

Milk provides the necessary amount of protein for the infant. When solid foods are introduced, some protein is found in cereals and vegetables. A good source is egg, meat, fish, and poultry.

Milk is also rich in calcium, one of the minerals for which there are high nutritive needs. Since milk is the primary food during infancy, the calcium supply is adequate. The relationship of the amount of calcium to phosphorus is important in its absorption and utilization. The baby's formula is based upon this ratio found in human milk.

Your baby was born with a reserve store of iron which will prevent a deficiency until iron-rich foods are added to his diet. Both breast and cow's milk are low in iron content. It is interesting to note that the iron from breast milk is better absorbed by the infant than that from the formula.

Iron may be added to the diet in several ways. The vitamin supplement prescribed often contains iron. Cereal, one of the first foods introduced, is frequently reinforced by iron. Usually egg yolk, an excellent source of iron, is added after the third or fourth month. Meats, especially liver, also contain iron.

Other minerals, though of great importance to your baby's well-being, seem to be adequately supplied in milk and infant foods. These minerals include sodium, phosphorus, chloride, manganese, and many others. The need for fluorine, which seems to be increasingly important in the develop-



ment of your baby's teeth, may well be met through public health measures.

Vitamin needs of the infant are many and varied. They are supplied in several ways. Vitamin A may be provided by milk alone, if the mother is properly fed. Vitamin A is further furnished by egg yolk and liver when these foods are added to the diet.

Since both cow's milk and human milk have very small amounts of Vitamin D, it is usually given in supplemental form early in the baby's life. However, cow's milk today is often fortified with vitamin D and your doctor may consider this sufficient.

Vitamin C may be called the "elusive" vitamin. This is because this vitamin is easily lost from foods by exposure to heat and air. Human milk, if the mother's diet is adequate, will contain enough vitamin C for your baby. Cow's milk contains very little. Thus, formula fed infants are given ascorbic acid (vitamin C) rich foods beginning in the first few weeks. This may be in the form of orange, grapefruit, or tomato juice.

Of the B-complex vitamins, we know most about the infant's needs for thiamine,

riboflavin, and niacin. Both human and cow's milk seem to meet the nutritive needs for riboflavin and niacin. However, they are both fairly low in thiamine.

If deficiencies occur, they are promptly met by the addition of solid foods. Cereals and other foods are good sources of thiamine.

Recent studies have included investigations into the requirements for pyridoxine (B-6) and B-12 though, so far, no recommendations regarding specific amounts have been made. Other vitamins, such as pantothenic acid, biotin, choline, and so on, have not been studied extensively enough in human nutrition to be able to state specific needs. The baby's (and our own) requirements seem to be small and adequately supplied by existing diet patterns.

None of these methods of meeting nutritive needs requires any "magic" of special foods. Instead, feeding your baby a nutritionally sound diet is simply done by utilizing familiar foods found in every section of our country. It is easy and lots of fun, since almost all of these foods are found in the nearest supermarket's baby food section!

Dressing Baby is a Matter of Love



Doll-like baby girls are cuddly and comfortable in dress sets of easy-care cotton knits. They have dainty fashion details and of course, plastic-lined panties.

Your baby's clothes have all been selected with tenderest considerations for his comfort; they are just one more of the many symbols of your love for him. When you dress him for the first time at home, your protectiveness and maternal feeling will make up for your lack of experience. Soon you will discover that even the tiniest baby is unexpectedly rugged — that he can be handled without apprehension on your part as long as your hands are gentle and kind.

At first, dressing your baby will be like dressing an inanimate doll, and your most important job will be to see that all clothing is put on with the least possible discomfort to him. But later, as the baby develops strength and muscular control, he may protest the indignity of being dressed by wriggling, crying, and even fighting you in his own small way. If this happens, it is a good idea to have a favorite toy or

music box at hand to keep him diverted while the dressing process is taking place. Singing and talking to him will also help.

Your baby's first clothing needs will be simple; shirts, diapers, sacques, kimonos, gowns—all of the softest possible fabrics, and of unrestricting design. His first exercise will be kicking his feet and waving his arms about, and he can't enjoy this healthy fun if his clothes are tight or binding.

Of course, you will also want some dress-up outfits for showing your darling off to visitors. When you select these, keep in mind that today there are definite fashions for baby boys and girls, and that they are just as different in design as your clothes and Dad's. Even today's christening fashions recognize this difference—there are sweet white suits and creepers for tiny boys, while baby girls still wear the



Baby's shirts never bind — and they have necklines that stretch wide to slip over the head or feet with no discomfort to him. The tapes at each side are for pins — or for Gripper snap fasteners.

traditional long (or short) embroidered dresses.

There are some basic tenets of commonsense dressing that hold true throughout baby's first year; such as —

- Keep baby's clothing loose and easy. Outgrown sacques, sweaters, gowns, etc. should be immediately replaced as they may hamper growth.
- Keep baby underdressed rather than overdressed. What is comfortable for you in the way of clothing or covering is a good guide to what is right for your infant. It is easy to add an extra blanket, or to slip on a sweater, if baby seems to need it or if the temperature drops.
- Keep unsafe fastenings or irritating fabrics away from your baby. Gripper snap fasteners are safe; they make dressing easier as well. Necklines that tie are taboo; so are materials that feel unpleasant to your touch. Remember, they will be even harsher next to baby's skin.
- Keep calm and unruffled when you are dressing your baby. No matter how rushed or busy you are, don't make baby the victim. If anything has to be pulled or tugged, let it be the garment — never baby's tiny arms or legs.

As your baby grows, his clothes will become more varied. On these pages are pictured the highlights of a well-dressed baby's wardrobe during his first year. There are many other types of clothing your baby will undoubtedly wear, but these are the basics that will keep him comfortably, happily and smartly clad from the crib stage right up to crawling and walking.



Topper sets — also called diaper sets — can be simple or very highly styled, depending on the occasion. They have plastic-lined pants, which make them practical for the tiniest baby.



The kimono, like the sacque, is a basic garment for infants. White and plain colors have their place, but many mothers like the fresh new look of gay baby prints.



Creeping-and-crawling days call for protected knees. Overalls and coveralls are ideal; in cotton knit, corduroy or gabardine. Baby needs good shoes, too, for these first adventures; be sure to have them fitted.

Grow-Up Trends in The Nursery

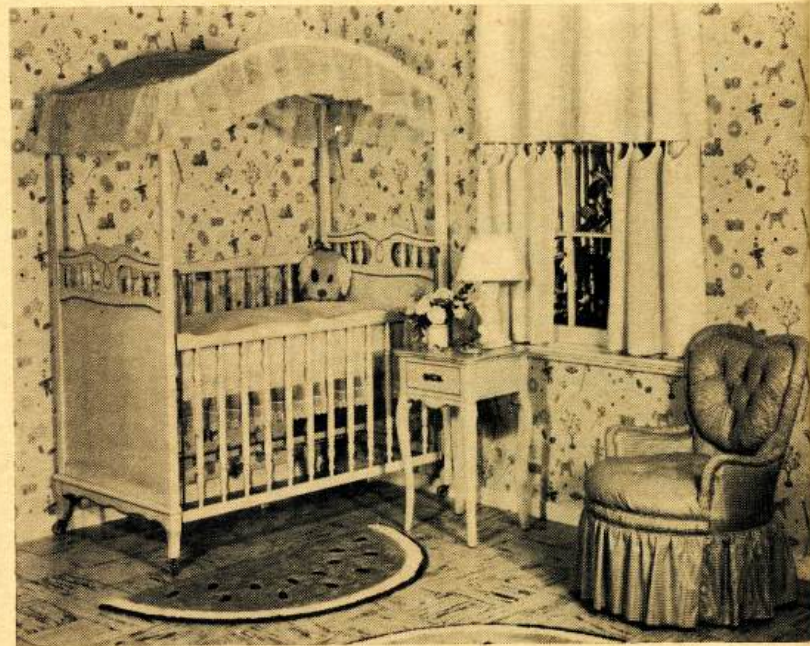


DANISH MODERN

Fresh and easy-to-care-for, this trend lends itself to a sparkling color scheme—powder blue and white with accents of yellow or gold. Cutout animals applied to the wall are very appropriate with this style; so are mobiles and displays of Baby's colorful toys.

FRENCH PROVINCIAL

Gently-curved lines and fruitwood or painted finish may be enhanced by white cafe curtains with contrasting red trimming, and by gay wallpaper or accessory pieces. The canopy is a charming touch in a nursery.



MODERN

A clown rug in orange on spatter-design linoleum floor of basic yellow, marigold and brown enhances this functional furniture. Yellow formica top table is practical; yellow is repeated in fabrics.

Decorated 5 Wonderful Ways

By Ruth L. Strauss

*President of the New York Chapter
American Institute of Decorators*

TLC, or "tender loving care," can be translated into the decoration terms of texture, light and color. How important they are to your baby and growing child!

Texture: clean and crisp at the windows for curtains; linoleum or vinyl floor, so easy to wipe clean; and with a soft washable rug for your baby to crawl on—and a joy for Mother to launder.

Light: must be softly diffused with no glare for Baby, yet bright enough for Mother to perform her daily routines. There should be three sources of light: one overhead ceiling fixture with glass or plastic cover for general working; a table lamp or study floor lamp for the delightful time of Baby's feeding and loving attention; and a soft night light that will not disturb Baby, yet bright enough to guide Mother or Father for that last peek.

Color: to create a happy atmosphere—soft pastels on the large areas of walls and ceiling, with some bright colors for accents in curtains, spread and chair. Consider pale sunny yellow combined with cornflower blue and white for a northern exposure, or pale aqua spiked with accents of marigold and sea green for a southern exposure. Wallpaper on one or two walls only is preferable; be sure it is definitely scrubbable.

PROVINCIAL

Provincial that stems from the French but with a less formal look takes beautifully to a mellow brown finish.

Small plaids or checks in clear colors, repeating one of the colors of the wall, are fresh and suitable. Curtains may be soft tie-back style of drip-dry fabric. This type of decor is especially suitable as your child grows up.



CONTEMPORARY

A great deal of style can be achieved with this easy-to-adapt furniture. The simple lines and interesting appointments invite the use of warm and exciting colors and fabrics. Wallpaper, too, should be simple and smart.



A Baby Loves

New Places and People



A stroller is a real necessity. Many parents even fold it and take it along on long visits and vacation trips. Reclining back permits baby to sleep in it while on-the-go.

By Mildred Crane

Parents who are worried about taking young babies on very long, arduous trips are amazed at their adaptability and contentment.

Security is a baby's greatest need; he has this when his parents are with him, loving him, no matter where he happens to be. But his creature-comforts must be considered too.

A baby will be as mobile a little person as you like, as long as he has a suitable place to sleep, a place to eat, a place to play. Happily, there are all kinds of special things created primarily to provide a baby with a "home away from home."

An infant's first real adventure into the big outside world is via the airings he enjoys in his stroller or carriage. With mother or Dad propelling him along, he is overjoyed to be out in almost any kind of weather. Of course, before his sixth week, he won't go out on damp or rainy or very windy days. But after he weighs about ten pounds, he can enjoy jaunts in near-freezing temperatures, and in almost any weather, within reason.

Visiting is another pastime a baby loves, especially a visit to



Baby will spend many happy hours in his playpen; this, too, is useful to have with you when you are paying a prolonged visit. The new mesh models are lightweight; fold easily for carrying.

Grandma's. Your baby will be a very popular guest if you have the right equipment along to keep him peaceful and happy, and to give you freedom to relax with your hosts. There are numerous folding devices which provide the baby with the niceties of daily living as he is used to it. Parents who are inclined to pick up at a moment's notice and go on a motor trip, or a prolonged visit should provide themselves with equipment that will fit right into the car trunk.

No matter what you buy of this nature, check every aspect of the *safety* of the equipment. Have your husband join you in this project. If it is something you will want to fold and carry yourself when Dad is not around to help, practice folding and lifting before buying it.

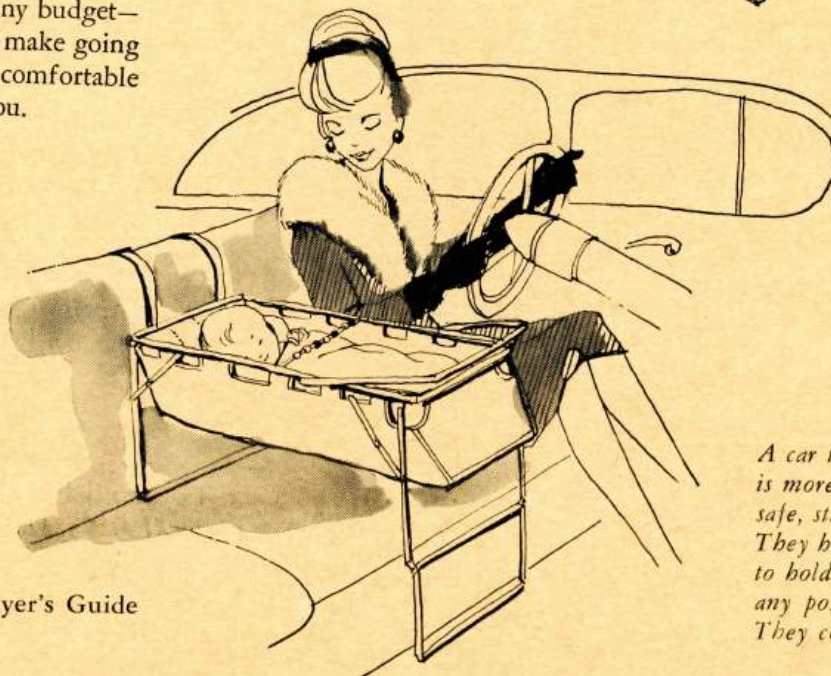
Never buy equipment that is just large enough to hold the baby in his present stage of development. He is going to grow very rapidly during his first year, and may very soon outgrow that piece of equipment you thought would last all through his babyhood.

Remember, your baby will develop all of the instincts and enjoyment of a globe trotter if you give him a chance. Sketched on this page are examples of popular equipment for a baby. All of it is readily available and priced to suit any budget—so buy what you need to make going places with your baby comfortable for him—and fun for you.

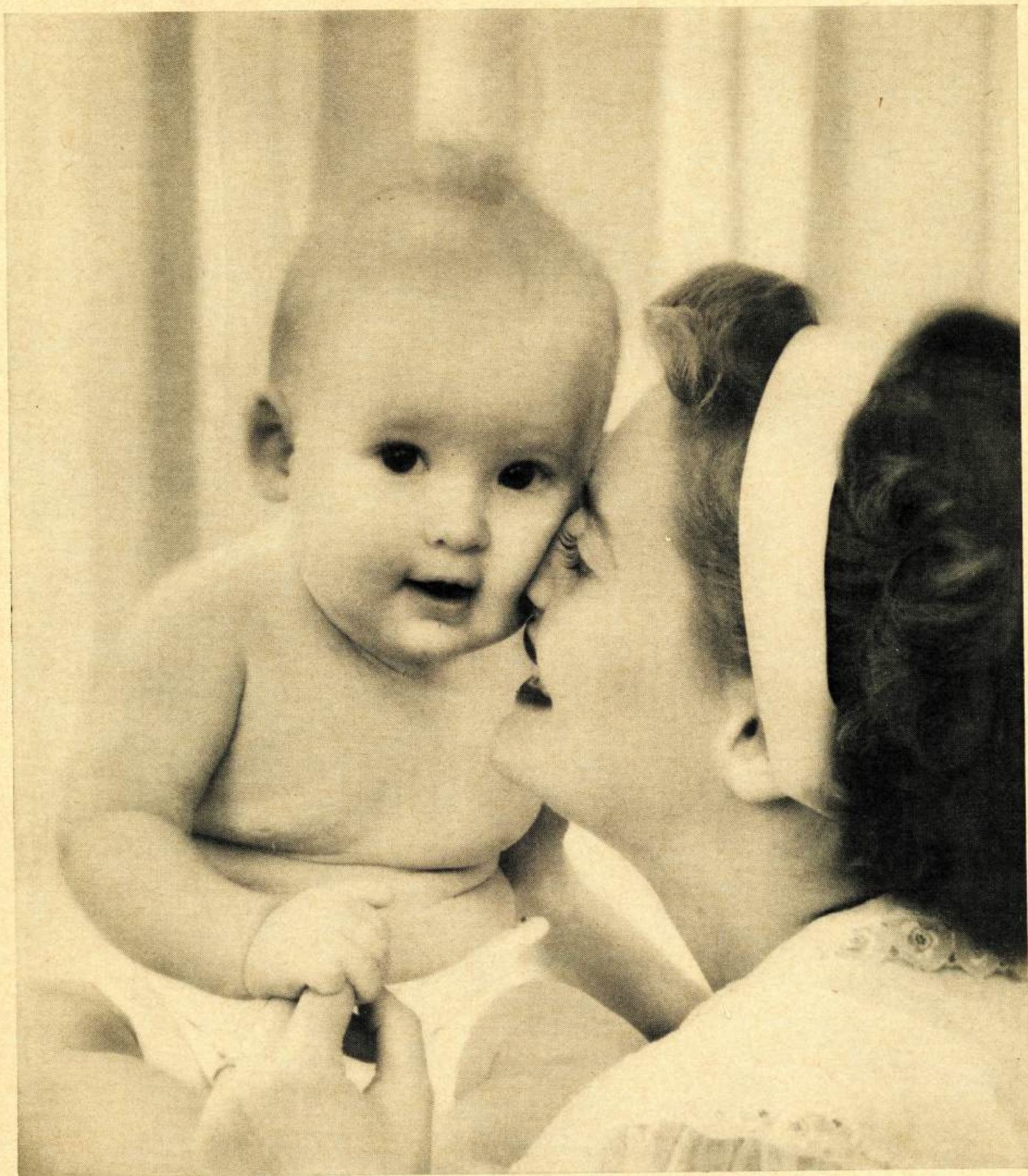


Wonderful accessory for tiny infants is the sleeper-seat. It's very easy to transport anywhere; baby can sit in it for eating and can nap in it too.

At home or away, a crib like this is a boon to mother! It folds — is easily portable — and the screening protects Baby during summertime outdoor siestas.



A car trip with a baby is more fun with today's safe, sturdy carbeds. They have adjustable legs to hold them rigid in any position you like. They convert to seats too.



Mother and baby share a happy smile. At this age baby recognizes his mother's face; he enjoys her loving care, her soft voice and her playful gestures. He responds to them by waving his arms and legs excitedly in the air; he coos, goes, gurgles and even laughs out loud.



Baby indulges in a rare moment of thoughtfulness. He may be wondering what happened to his bottle, or who that stranger is standing in the doorway. This transitory mood will soon give way to tears or laughter

Watching Your Baby Become a Person

By Roslyn Beilly Polisar

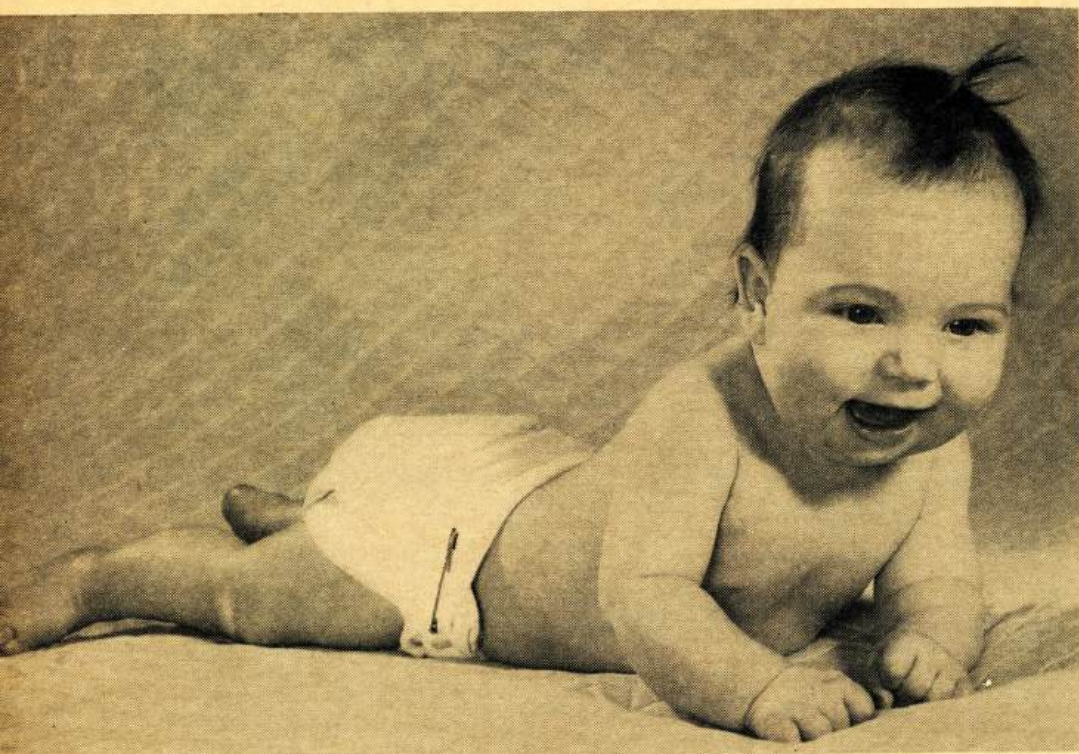
One morning your baby will greet you with a smile—not the fleeting smile of early infancy, but a delighted grin of recognition. This is one of a series of "firsts" that will surprise and thrill you as your baby develops.

From day to day you will notice new changes, new skills and new dimensions in his emerging personality. You will become aware that your baby has moods. Sometimes he's happy—watch him fit one toy into another—he will chortle with glee and satisfaction. At other times he is angry and frustrated—when he learns to pull himself up in the crib, for example, but can't sit down again. Occasionally he's thoughtful, more often he is eager to meet the challenge of each new experience. And then there is the inevitable crankiness, when he is overstimulated or just plain tired and sleepy.

Your baby runs the gamut of emotions, and all of them testify to his burgeoning individuality. Pictured here are some memorable examples.



Learning to hold his head erect is quite an accomplishment for a baby. Perhaps this baby is smiling in triumph at his achievement; or he may be laughing at all the wonderful things he can now observe around him.



How Fast Should Baby Grow?

By Margaret Trippett

A baby's growth is a matter of interest to the entire family. Mothers watch it hopefully; fathers proudly; grandparents comparingly. All of this is understandable but a little dangerous if carried too far. A baby should be healthy, strong and well—but size or weight is not necessarily an indication of these things. A small-boned lightweight baby may be a better physical specimen than a very chubby infant. Each baby has his own rate of gaining and growing.

There are, however, a few basic facts about a baby's growth that every parent should know. For a few days after he is born, a baby will lose a little weight. But after he loses these few ounces and is started on regular feedings, he will quickly begin to gain again.

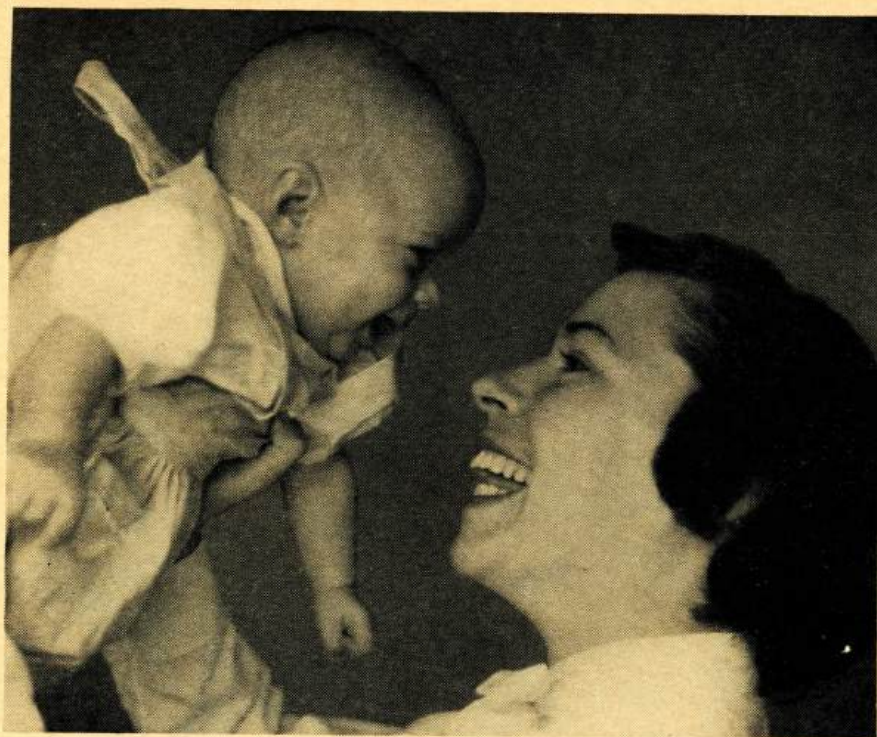
The average baby tends to grow much faster in weight than in length. In just a few months, a healthy baby will double his birth weight. It will take the same baby about four years to double his height. Sta-

tistics show that the average infant grows about ten inches in height by the end of his first year.

One common mistake many new mothers make is to assume that a baby's weight gain should be the same from month to month—and to worry when it isn't. Actually, a baby's weight gain may fluctuate; the thing that really matters is that the gain is steady. Many pediatricians advise new mothers not to weigh their babies at home but to wait until it is done in the doctor's own office during the baby's regular monthly check-up. If a mother has a tendency to worry, this is a good idea.

In the early months of infancy, a baby will gain more than in the later ones. He will add more to his weight between his second and third month than between his ninth and tenth. Baby boys for the most part are a little larger and heavier than baby girls throughout infancy but this, too, is a generalization and of course, does not always hold true.

The best advice for new parents (and grandparents too) is never to compare a baby's weight or height to another baby's—and to take the doctor's word that your baby is growing and gaining as he should. This is why you have a reputable pediatrician or doctor for your baby—and you can be sure that he is as interested in your baby's welfare as you are.



Can You Spoil Your Baby?

By Susan Ritchie

Yes: After your baby has passed the three month mark, there is some small chance of spoiling him. Since this kind of spoiling can easily be dealt with, however, there is no need to become too concerned about it.

When your infant cried because of colic, you picked him up. By this time, except in rare instances, the colic and irritable crying of early infancy is over. But your baby may still want to be walked and held. Here is where you must exercise your judgment. It's quite apparent when your baby is crying with pain or discomfort and when he is crying out of pique or loneliness.

This is the time to take a stand. Of course you won't change your baby's habits all at once, but you will be pleasant but firm. At bedtime, for example, you can tell him that you expect him to go to sleep without being walked or rocked or held. He may not understand your words, but he will certainly understand the tone of your voice, and your intentions. And, chances are, he will comply without too much fuss.

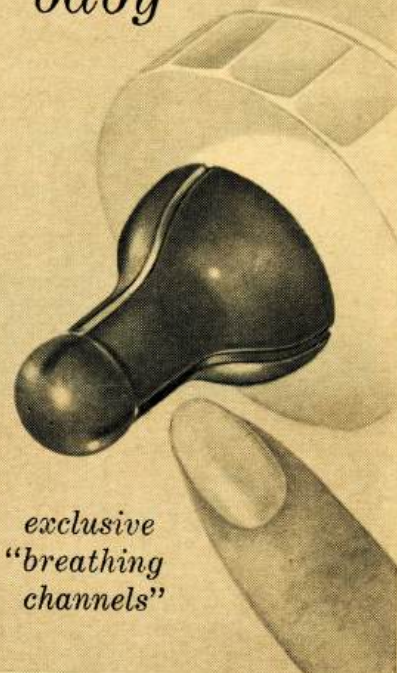
No: This is a question that concerns all new parents. And if your baby cries between feedings instead of sleeping peacefully, you're bound to wonder how to avoid spoiling him.

There is little danger of spoiling a baby before he is three months old. When he fusses, it is because he is unhappy or uncomfortable. He is not looking for attention, but rather expressing his feelings of misery.

If he stops crying when you pick him up, but then starts all over again when you put him down, this may convince you that he is spoiled. Not at all. What happens is that the warmth and pressure of your arms make him forget, momentarily at least, his pain or discomfort. And when you put him down again, he remembers how miserable he is and begins to cry again.

Your baby needs to know that you love him and care about him. By feeding him when he is hungry, changing him when he's wet, or cuddling him when he seems to need nothing but the feeling that you are close to him, he feels secure.

Makes
swallowing
easier
for
baby



exclusive
"breathing
channels"



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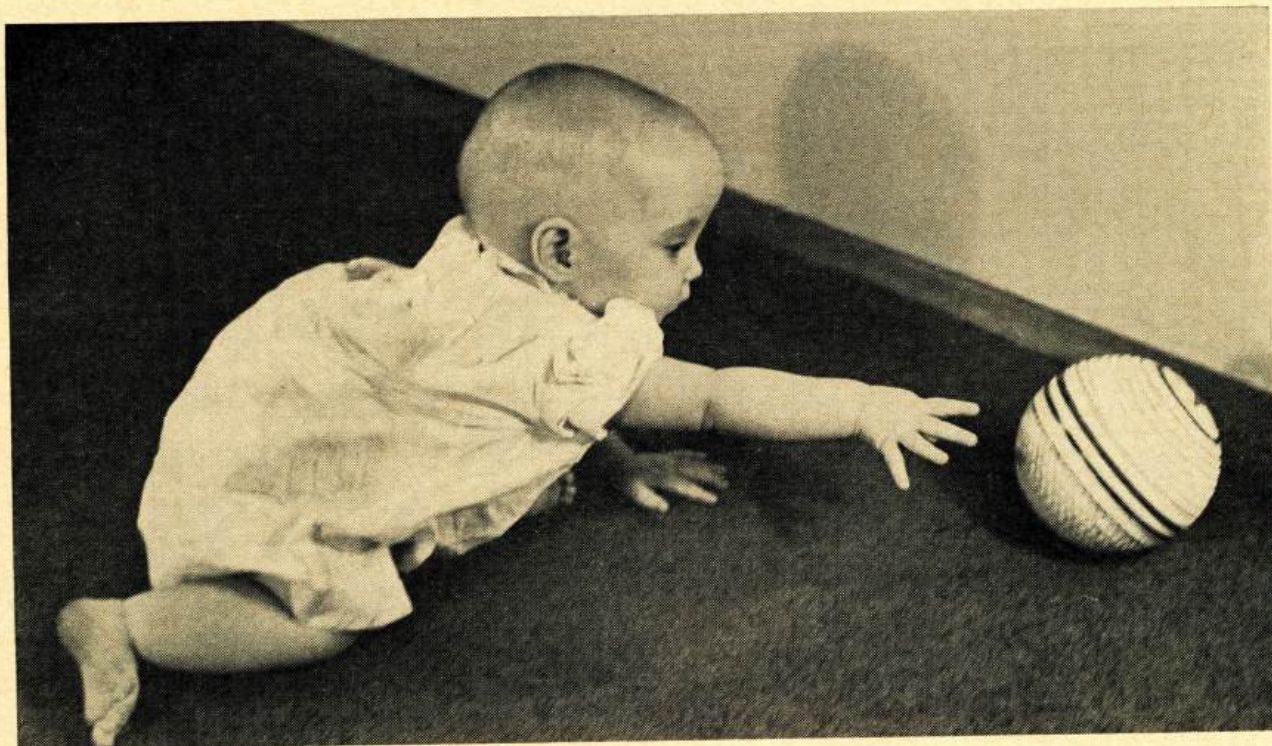
Exclusive "breathing channels" permit baby to breathe easily while feeding...encourage a *natural* swallowing action. This eliminates gasping for air; reduces interruptions for bubbling.

The Feed-Rite Nipple is found only on Davol Feed-Rite Nurses—with these exclusive features. Glass with twin-dimple finger grips for more secure, comfortable handling. Glass and Plastic with rounded-square shape for easier cleaning and storing.

All Feed-Rite Nurses—"Thriftie," Color-Scale, Pyrex, Plastic—are featured in Formulette Nursing Kits.



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Toys for the First Year

By Grace Langdon, Ph.D.
*Child Development Adviser
to the American Toy Institute*

Children need toys. They need them for fun. They need them to satisfy the ever-present urge to be active, to be up and doing. They need them for all of the investigating, exploring, experimenting, manipulating, creating, that is so much a part of growing.

When the baby first begins to grasp and reach out for things offered him and to notice sounds, it is time for rattles of different sizes, shapes, and tones, and for squeaky rubber animals and dolls. Soft woolly animals and dolls will satisfy the urge to feel and squeeze and later to hug and cuddle. Toys that fasten to the side of the crib afford fun for exploring eyes and hands. So do the exercise toys that stretch across the crib. The baby will reach for the rings and bars on these and very soon will pull vigorously on them. Floating toys add fun to bath time and it is interesting to watch the growing skill with which eyes and hands work together as the baby pursues them. Strings of big wooden beads are fun to wear and to shake and bang.

Very soon the baby will be sitting up and

holding things with a sure, firm grasp, turning the objects this way and that, and passing them from one hand to the other. It is time then for small rubber plastic or wooden blocks. It is a good idea to get toys of different colors and with pictures on them because before long looking at the pictures or sorting the blocks by color will be part of the fun. The transparent blocks with objects inside are fun to shake and rattle.

The baby's growing interest in sounds suggests providing books of Mother Goose rhymes and jingles to read to him, as well as the picture books of familiar animals and objects that children like so much.

When creeping and walking days come it will be time for push-pull toys, animals on wheels, roller toys, a little light doll carriage, a small light wagon. The musical, chiming, push-pulls are always good fun. Simple take-apart and put-together toys satisfy the urge that the youngster has about this time to handle, investigate, manipulate.

As a child plays with toys such as these that have been suggested he is taking his first steps in getting acquainted with the world of things around him. He gets the feeling of hard and soft though he does not know the words that describe the feeling. He gets the feeling of different shapes. He catches the tones of different sounds. He feels the lightness or heaviness of the things he picks up. He catches the idea of fitting things together even though he cannot always do it. Most of all he is interested and having fun.



*Newest idea in gauze
diapers is the
new stretch weave.
No matter how much baby
grows, his diaper will
stretch to fit him.
It's easier to pin too!*

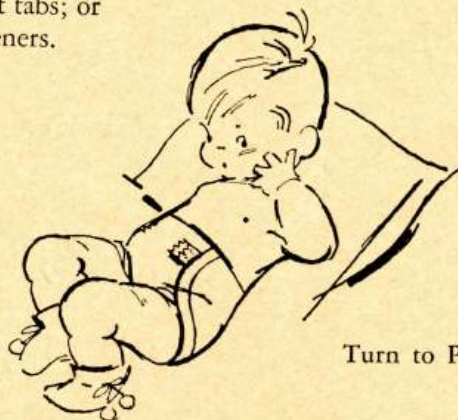
New Ways With Diapers

The old days of "three-cornered pants" have given way to a new era of design in diapers. Although the rectangular diaper is still a favorite, there are many new types available which make diapering easier for mother, and every bit as comfortable for baby. Whatever type of diaper you select—whether it's printed, fitted, shaped, knitted or equipped with pinless fastenings—the correct way to diaper your baby hasn't changed. Do it like this: Place baby on the top of his bath table, or on a well-padded dressing table. (Diapering on a bed or sofa is not a good idea.) Place the diaper under baby's buttocks and adjust it for position and size. If you are using a diaper liner or disposable pad, make sure it is in place. Be sure baby is properly cleansed, powdered or oiled before you bring the diaper up between his legs. To pin the diaper, place your fingers between baby's skin and the pin to avoid pricking him. Pin to the shirt tabs; or use the perforations in the tabs to hold snap fasteners.



*Separates change the
whole approach to diapering.
Outer plastic panty with
snap fasteners has inner
straps to hold gauze
diaper or disposable
diaper pad. No pinning!*

*Another pinless style is
the pre-folded diaper that
fastens with Velcro at
each side. Adjusts to fit
in both length and width.*



Turn to Page 45 for Buyer's Guide

When to Call the Baby's Doctor

By Joan Ann Unger, R.N.

While you are in the hospital, you have the reassuring feeling that your new baby is in good hands. The doctor has examined him and pronounced him hale and hearty; the nurses are kind and efficient and optimistic about his progress.

When you get home, however, you may have moments of doubt. Even if you have been properly initiated into the rites of formula-making, feeding and baby care, a new baby can be intimidating, especially when it is your first baby. Every time he cries or coughs or moves, you may wonder what to do. And you may be tempted to call his doctor to find out.

Chances are that most of the time you'll stifle that impulse and do what common sense dictates. Your baby's doctor would tell you what you already know—that your baby is a living creature, that he will be hungry or sleepy or uncomfortable, and that the odd noises he makes that alarm you are a normal part of his development. You will discover these little idiosyncracies as you get to know your baby and how to handle him. With time comes experience and self-assurance along these lines.

Most baby doctors have a telephone hour—a period during which they answer mothers' questions. Ask



your doctor about this. If something comes up that is not urgent enough for a visit from the doctor, but cannot wait until your next appointment at his office, call him during his telephone hour.

Now that we have discussed when *not* to call your baby's doctor, let's talk about the times you will want to call him. When your baby shows any prolonged symptoms, by all means get in touch with him. For example, if he spits up a little of his bottle, you will try to find out why he did and proceed from there. If he spits up or vomits after every bottle, of course, you'll want to talk to his doctor about it. Whenever he cries, you will handle the situation, but if he persists and cries after each bottle, or seems to be in pain, naturally you will want your doctor to know about it.

If your baby has any alarming symptoms like temperature, an unusual rash or a coughing and sneezing spell, don't hesitate to call your doctor. The general rule is to notify him of the appearance or persistence of any symptom that is at all unusual.

A change in your baby's general behavior, for example, if it persists, can indicate that he is not feeling well. If he has been a good eater and suddenly has no appetite, or if he has been a lively, happy baby and suddenly becomes listless and apathetic, or if he seems very drowsy, you will want to report these changes to your doctor.

Buying Guide for New Mothers

The merchandise pages in this issue give a complete picture of the essentials you need for Baby.

Pages 32 and 33—Dressing Baby is a Matter of Love

Shirt, dress set and kimono—the William Carter Co.

Topper set and overall—Thomas Textile Company.

Pages 36 and 37—Baby Loves New Places and People

Stroller—Frank F. Taylor Co.

Playpen—Cosco

Sleeper Seat—Welsh Nip-n-Nap.

Screened Crib—Trimble

Car Bed—Kantwet (Rose-Derry).

Page 43—New Ways with Diapers

From top to bottom:

Stretch Diaper—Curity,
(Kendall Mills).

Diaper Separates—Chix,
(Chicopee Mills).

Velcro Diaper—Riegel

Pages 34 and 35—Grow-up Trends in the Nursery

Danish Modern—Storkline.

French Provincial and

Contemporary—

Edison Little Folks Furniture

Modern—Port-a-Crib Co.

Provincial—Childcraft.

Picture Credits

Doris Pinney

5, 17, 19, 21, 23, 28, 31, 38, 39, 40,
43, 46, 47

F. P. G. Studio....16, 24, 39, 41, 44



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when you want it

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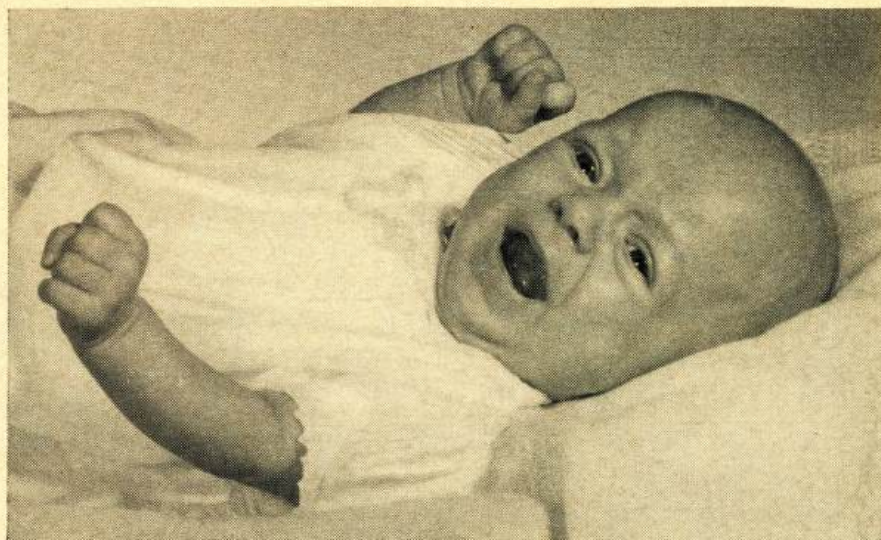
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What to Do About Colic

Colic is like the weather—we talk about it but we can't change it. We can, however, understand it and relieve the baby of some of the discomfort it can cause.

Colic seems to have no relation to feeding, since both breast and bottle fed babies may have it.

If your baby has colic, try not to be too concerned. Babies who have colic seem to gain weight and thrive as well as babies who do not. Another comfort is that colic rarely lasts beyond the baby's third month, and it leaves no ill effects.

With these two reassurances in mind, it's important for you to relax. This may be difficult to do when your baby is passing gas, pulling up his legs and crying in pain, but you must remember that tension and worry will only aggravate the situation. The best prescription for a colicky baby is a climate of peace and quiet at home.

There are some concrete things you can do to help him. One important thing is to be sure to get him to burp before he goes to sleep. It may take him a long time to do it, and it's a temptation to put him down without it. But, eventually, he will need to burp, and if you can be patient with him until he gets it up, he may not suffer as much. Another help is to let him sleep on his stomach. Some babies, especially the ones who cannot burp easily, can learn to burp

themselves when they sleep this way. At any rate, it's worth a try.

If it soothes your baby to be rocked and held when he is uncomfortable, by all means do so. You may be afraid to spoil him, but this probably won't happen. As soon as he feels better, he will be just as happy to go quietly off to sleep as you are.

If he seems to be suffering, you can put a warm hot-water bottle wrapped in a diaper or towel on your lap, rest his stomach on it and gently rub his back.

If he is extremely uncomfortable, a warm enema will give him immediate relief. This is not a remedy that should be used too often, but only as an emergency measure when the doctor advises it.

The best advice, however, is to keep yourself and your baby free from tension. Talk to him softly; handle him slowly and gently. Cultivate an unhurried atmosphere.

It's a good idea to get away from the baby occasionally. An afternoon or evening out will cheer you up and make it easier for you to cope with his discomfort. It will also help to bring the problem into the proper perspective.

If nothing seems to help, you may have to let the baby cry, especially at night. You need your rest, too, so that you can wake up refreshed and ready for the next day.

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Rx for Your Post-natal Care

By
Alan F. Guttmacher, M.D.
*Director of Obstetrics,
Mount Sinai Hospital, N. Y.
Author of "Pregnancy and Birth"*

The first six weeks following the birth of a baby is a time of rapid and profound recuperation and readjustment. Frequently the patient feels so well that she wants to see the world; if permitted, she is likely to pay for it by excessive weariness and a depressed "let down" feeling.

During this entire six weeks period, the time between two and four in the afternoon should be held inviolable for the afternoon nap which you really need.

Stay on the same floor for three or four days after getting home from the hospital, if convenient. If not, you may go downstairs once a day, perhaps for dinner. If you do, you might as well stay down for the rest of the evening.

When you have been home three or four days, you may walk downstairs and, if the weather is nice, go outdoors for a five minute stroll. The next day, you may go out a little longer; each day increase your activities. When you have been home ten days, you may do nearly what you please—go downtown to movies, go out to dinner, do light housework, et cetera. Don't assume heavy household duties until the baby is three or four weeks old.

If you are breast-feeding, you must drink a full quart of milk each day and go lightly on cigarettes, if you smoke. Otherwise, you may eat, drink and smoke what you want.

A patient should be seen in her



physician's office five or six weeks after confinement for a thorough examination. This visit is an integral part of good obstetric care. It furnishes the physician an opportunity to take stock of his results, gives the patient the advantage of having any abnormality corrected, and offers patient and doctor a logical opening to discuss future pregnancies.

The more than seven months of long, close acquaintanceship between doctor and patient are about to end. It is the unusual patient who does not express gratitude. Most obstetricians remain lifelong friends to the couples they have served. By being constantly associated in the parents' thoughts with the happiness and pleasures of parenthood, the obstetrician occupies a unique position in the medical hierarchy, a very favorable position near the top.

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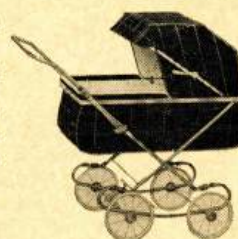
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What items did you buy first?

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Peg Rivers, Editor

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How sight-seeing helps your baby's eyes

- Bravery at the beach
- New "Baby Breakfast"

An interesting eyeful helps your baby's vision develop. Eye muscles—like all muscles—need plenty of exercise.

• A good idea in the early months is to let baby lie where he can practice *looking*—at people and things, not just the ceiling or the sides of a padded bassinet. Hang colorful toys at arm's length across his crib or, higher up, hang a mobile that he'll eagerly watch as it jiggles or sways.

• For several weeks baby's eyes will be "independent operators" and occasionally go their separate ways, with cross-eyed or wall-eyed effects that needn't alarm you. Eye muscle control develops gradually and at different ages—but most three-month-olds can focus both eyes straight at you most of the time. If baby's eyes cross very often after six months, your doctor will probably suggest seeing an eye specialist. Early treatment can be most effective.

• Baby "eats with his eyes," too, you know—and the color of food is important in appetite appeal. Which may be why Heinz golden-yellow Applesauce & Apricots is so popular with small fry. For a dish exciting as a "sundae," serve it atop baby's cereal. Added attraction: Heinz Applesauce & Apricots contains vitamin A, which helps keep eyes healthy.



• Cool idea on a hot day: serve your baby a hearty menu at breakfast—summer's coolest meal. He'll love Heinz tasty new "Baby Breakfast," Strained Ham & Egg Yolks. These tasty all-in-one breakfasts supply high-quality protein, blood-building iron, and important vitamins. "Baby Breakfasts" come with handy screw-on caps, now found on all Heinz Baby Foods.

• A timid baby at the beach gets braver much faster if she—or he—isn't hurried into the swim. Let baby "test" the water, one foot at a time, and let him retreat (with honor), if he's frightened. Your next problem may be how to keep baby out of this exciting big bath tub!

• An apple-based drink a day keeps vitamin C worries away—and gives your baby a delicious beverage, too! Fresh apple juice—pressed from luscious sun-ripened fruit and blended with other rich natural fruit juices—makes fine refreshment. Fortified with vitamin C, Heinz apple-based juices come in: Apple, Apple-Apricot, Apple-Grape, Apple-Pineapple, and Orange-Apple-Banana (a Heinz exclusive). Also rich in vitamin C: tasty Heinz Strained Orange Juice.



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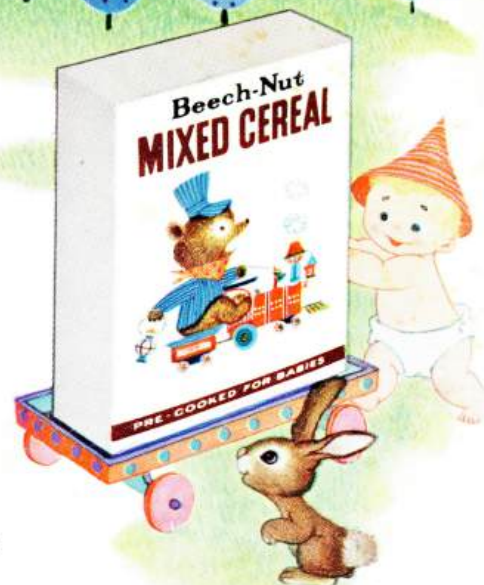


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